

Name	School
Wood, Walter James, Beaumont.....	Univ. of Oregon
Wright, Thomas Franklin, Los Angeles.....	Coll. of Med. Evangelists
Wyborney, Eugene Henry, Monrovia.....	Univ. of Oregon
Yellin, Daniel, San Francisco.....	Univ. of California
Ziegelstein, Julius, San Francisco.....	Univ. of Hamburg, Germany

### INCOMES OF PHYSICIANS\*

The average physician, according to a study by the Committee on the Costs of Medical Care, sent out bills in 1929 amounting to \$11,200. He collected \$9,020; paid out \$3,716 for overhead and professional expenses; had a net income left of \$5,304. That is, for every dollar's worth of his services which he sold, he received for his own personal use 48 cents.

So far, so good. A net income of \$5,304 a year is a living wage, even for persons who have to spend seven to ten years getting ready to earn it and several more years waiting for the public to find out that they are ready. The joker in the medical-income pack is not the average income. It is the remarkably large number of physicians who never get within signaling distance of the average income. The big majority of doctors are in about the same fix as the big majority of citizens of Dearborn, Michigan. The average income of the people of that town is fine because the Ford family lives there.

#### THOUSANDS ARE UNDERPAID

Half of the 145,000 physicians in the country in 1929 (the \$5,304 average year) had net incomes under \$3,800. Thirty of every hundred had less than \$2,500. Fifteen in every hundred had less than \$1,500. The average income of physicians in 1929 was higher than that of dentists or teachers in colleges, but there was a larger proportion of physicians who earned low incomes (under \$2,000) than there was among dentists, college teachers, mechanical engineers, and professional and scientific workers in government service.

The prosperous group was correspondingly small. Among private practitioners, 5 per cent got nearly 25 per cent of the entire net income. Less than one-fifth of all physicians got half of the total net income received by all physicians put together. Fifty per cent of all physicians got less than one-fifth of the entire income of their profession.

#### HIT BY DEPRESSION

Physicians' incomes fell off, of course, during the depression. From \$5,304 in 1929, the average net income dropped, according to a United States Commerce Department Survey, to \$3,088 in 1933. This was the low year. By 1936, it had climbed back to \$4,484. In California, one of our comparatively wealthy states, one-third of all physicians in 1933 had a net income of less than \$2,000 and half had less than \$2,700.

Salaried physicians' incomes have been more even-tempered. Few salaried physicians have high incomes, the majority have modest but stable incomes, and a much smaller proportion receive low incomes than was the case among general practitioners in private practice in 1929.

A physician has to live and rear a family on a professional man's standard, and to do this with less than \$2,500 a year means hard going.

#### RURAL DOCTORS HAVE SMALL INCOMES

Who were the 42,500 physicians that in 1929 earned net incomes of less than \$2,500? Of course, a certain proportion were young physicians just getting under way. But a considerable number were mature men. Many were doctors in rural areas. In fact, half of all the physicians who were practicing in farming communities in 1929 had net incomes under \$2,500.

\* By Constance Kent.

Most of the low-income physicians, wherever they lived, were general practitioners, for there is a sharp contrast between the finances of general practitioners and specialists. The net income of general practitioners in 1929 averaged only \$3,900, whereas doctors who were specializing had an average net income of \$10,000.

#### MANY BILLS ARE NOT PAID

A doctor generally feels that he earns all he gets, but he knows that he never gets all he earns. On the average, physicians collect only 80 per cent of the bills they send their patients. And the average does not tell the sad part of the story, because the doctors with highest incomes show the highest percentage of collections, while, unfortunately, those physicians who have the greatest need to be good collectors show the poorest results. In 1929, physicians who earned \$15,000 and over, collected 89 per cent of their bills; whereas those who earned small incomes collected only about 50 per cent.

This means that it is easier to collect if you are working for the well-to-do than for the poor. In towns of less than 5,000 population, physicians collected only 78.5 per cent of their bills. Physicians in cities of one million or more population collected 86 per cent. This does not mean, of course, that rural patients are "slackers." It means that there is less money available for medical care in many rural districts.

The "white man's burden," for the majority of physicians, is threefold. First, high overhead (40 cents of every dollar collected). Second, poor collections (approximately 20 cents on every dollar billed must be charged to "loss"). Third, "free care," which the fine traditions of the medical profession call upon the physician to give.

#### PHYSICIANS RENDER PUBLIC SERVICE

The physician, like the skilled wage-earner, has only time and skill to sell. Unlike a mechanic, however, he is assumed by the public to have time and skill to give away. This difference in the public's attitude is unfair to the physician, but is easily understood. For the medical profession is not a business. It is by tradition and by the practice of the great majority of its members, a public service. And people who cannot pay for mechanics can generally contrive to get along. But sick people who cannot get a physician's care may die.—San Jose *Union Gazette*, July 7.

*Journal Index Reveals Vast Scope of American Medical Association Activities.*—Some conception of the vast scope of the work of the American Medical Association is contained in the semiannual Index Number (June 24) of the Association's *Journal*, an editorial in that issue points out, saying that:

It is recommended particularly that readers consult page 2644 of the index under the heading "American Medical Association." A survey of the material listed will indicate the vast scope of the activities of the Association at this time. It is in a sense a review of the work for the first six months of the year.

"Few people realize the information to be derived merely from turning the pages of an index one by one. For example, the relative amounts of material on page 2646, concerned with anaphylaxis and allergy and with androgens, indicate the extraordinary development of interest in the latter subject during the period covered by this volume.

"No other medical periodical provides in a six months' period the amount of information available through *The Journal of the American Medical Association*. It is with pardonable pride that we assert that the physician who wants to keep abreast of the scientific, political, economic, social, literary, or any other phase of medicine can do so by consistent, thorough reading of this publication."